

WISCONSIN 1115 DEMONSTRATION FACT SHEET

Name of Section 1115 Demonstration: (Title XIX and Title XXI)	BadgerCare
Date Proposal Submitted:	December 18, 1998
Date Proposal Approved:	January 22, 1999
Date Implemented:	July 1, 1999
Title XXI Amendment Submitted:	March 10, 2000
Title XXI Amendment Approved:	January 18, 2001

SUMMARY

The Wisconsin BadgerCare project is a statewide Medicaid expansion that seeks to utilize the State's current managed care delivery system, also known as BadgerCare, to provide health care services to both SCHIP and Medicaid beneficiaries.

The demonstration includes both Title XXI and Title XIX expansion groups.

ELIGIBILITY

Recipients eligible under the demonstration included:

- Children age 6 to 19 who have family incomes above 100% through 200% of the Federal Poverty Line (FPL) and who are optional targeted low-income children as defined in section 1905(u)(2)(B). (Demonstration Population 1).
- Custodial parents of children who are eligible under the State Plan or included in Demonstration Population 1 and the spouses of these custodial parents, with net family incomes through 100% of the FPL (Demonstration Population 2).
- Custodial parents of children who are eligible under the State plan or included in Demonstration Population 1, and the spouses of these custodial parents, with net family incomes above 100% through 200% of the FPL (Demonstration Population 3).

Demonstration population 1 is a Title XXI funded expansion group. The State also received approval of an amendment to the demonstration, effective January 18, 2001 that allowed demonstration population 3 to be a Title XXI funded expansion group.

Should the State use all of their Title XXI funding in a given year, both populations 1 and 3 would revert to Title XIX expansion groups.

There are currently about 30,000 people enrolled in the BadgerCare demonstration.

BENEFIT PACKAGE

- The BadgerCare demonstration project offers the State Medicaid package. Health plans under contract to the State are required to offer a comprehensive benefit package of State Plan Services.
- Transportation, family planning services, prenatal care coordination, targeted case management, dental services, chiropractic services, school-based services and tuberculosis-related services are reimbursed on a fee-for-service basis.
- Families enrolled in ESI receive a Medicaid wrap-around for services not included in the employer's benefit insurance.

ENROLLMENT/DISENROLLMENT PROCESS

- The State's fiscal agent, via an enrollment package sent by mail, informs all eligible beneficiaries of their enrollment options. Beneficiaries may mail in their election, respond by telephone or in person at regional outstationing sites. Beneficiaries have four weeks to select a plan.
- An enrollment broker is responsible for contacting each eligible recipients to assist in the selection of an HMO.
- Initially, recipients have a three-month open enrollment period in which to change their HMO selection. Recipients then must wait an additional seven months before they have the opportunity to change HMOs without cause.

DELIVERY SYSTEM

- Recipients will utilize the managed care delivery system in place for eligibles in the Medicaid State Plan.

QUALITY ASSURANCE

- The State has in effect a quality assessment and performance improvement strategy that is data driven, population based and interactive among stakeholders.

- Contracted managed care organizations must have a documented internal quality assurance/performance improvement program.
- Each contracted MCO must select annually at least two performance improvement priority areas from a list provided by the state for which they will provide detailed studies. Examples of priority areas are immunizations, diabetic care, outpatient asthma management.

COST-SHARING

- Families with incomes above 150% of the FPL must pay a premium of 3% of the family income.
- There are no other copays or deductibles.

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